



## REGISTRATION: MUNICIPAL BALLOT QUESTION COMMITTEES

**For persons and organizations other than PACs involved in Ballot Question Elections**—Any person not defined as a political action committee who receives contributions or makes expenditures, other than by contribution to a political action committee, aggregating in excess of \$5,000 for the purpose of initiating or influencing a ballot question shall register with the municipal clerk's office as a ballot question committee within 7 days of receiving contributions or making expenditures that exceed \$5,000. (21-A M.R.S.A. § 1056-B).

**An Initial Campaign Finance Report must accompany this form**—Ballot question committees must report all contributions and expenditures, whether cash or in-kind, made from the beginning of the campaign. Be sure to include expenditures such as those associated with the collection of signatures, paid staff time, travel reimbursements, and fundraising expenses.

Within 10 days of a change in BQC information an amended registration form must be submitted to the municipal clerk's office. The committee must also file an updated registration every election year between January 1st and March 1st.

Is this an amendment? ☐ Yes ☐ No

ALL SECTIONS OF THIS FORM MUST BE COMPLETED.

COMMITTEE INFORMATION	
Committee name	Acronym
Mailing address	Phone
City, state, zip code	Fax
E-mail	Website
TREASURER INFORMATION	
Name	Phone
Mailing address	
City, state, zip code	E-mail
PRINCIPAL OFFICER INFORMATION	
Name	Title
Mailing address	Phone
City, state, zip code	
Name	Title
Mailing address	Phone
City, state, zip code	

**ALTERNATE E-MAIL ADDRESSES**

To receive filing reminders and important information from the Commission.

1.

2.

**PRIMARY FUNDRAISERS AND DECISION MAKERS**

Identify any candidates, Legislators or other individuals who are the primary fundraisers and decision makers for the committee.

1.

2.

3.

4.

5.

6.

**COMMITTEE MAILING ADDRESS**

Correspondence will be mailed to this address.

Same as above. ☐

Street address or P.O. Box

City, state, zip code

**FORM OF ORGANIZATION**

Name the form or structure of organization, i.e., cooperative, corporation, voluntary association, partnership, etc.

Form of organization

Date of origin/incorporation

**STATEMENT OF SUPPORT OR OPPOSITION**

Indicate which ballot question the committee supports or opposes. If the ballot question has not been printed at the time of registration, please indicate whether the committee is involved in a citizen initiative or people's veto and the subject matter.

SUPPORT

OPPOSE

**SIGNATURE OF PRINCIPAL BQC OFFICER OR TREASURER**

Signature

Title

Print Name

Date

**IMPORTANT NOTICE****An Initial Campaign Finance Report must be filed with the municipal clerk at the time of registration.**